



(Official Form 1) (10/05)

**Voluntary Petition***(This page must be completed and filed in every case)*

Name of Debtor(s):

**Cormican, Edward P.****Cormican, Cheryl Ann****Prior Bankruptcy Case Filed Within Last 8 Years** (If more than one, attach additional sheet)

Location

Where Filed: **Northern District of IL ED**

Case Number:

**99-17540**

Date Filed:

**6/02/99****Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor** (If more than one, attach additional sheet)

Name of Debtor:

**- None -**

Case Number:

Date Filed:

District:

Relationship:

Judge:

**Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

I further certify that I delivered to the debtor the notice required by §342(b) of the Bankruptcy Code.

**X /s/ Mark E. Zaleski****September 21, 2006**

Signature of Attorney for Debtor(s)

Date

**Mark E. Zaleski****Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No

**Certification Concerning Debt Counseling by Individual/Joint Debtor(s)**

☒ I/we have received approved budget and credit counseling during the 180-day period preceding the filing of this petition.

☐ I/we request a waiver of the requirement to obtain budget and credit counseling prior to filing based on exigent circumstances. (Must attach certification describing.)

**Information Regarding the Debtor (Check the Applicable Boxes)****Venue** (Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

**Statement by a Debtor Who Resides as a Tenant of Residential Property***Check all applicable boxes.*

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

\_\_\_\_\_  
(Name of landlord that obtained judgment)

\_\_\_\_\_  
(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

# Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

**Cormican, Edward P.**  
**Cormican, Cheryl Ann**

## Signatures

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.  
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by §342(b) of the Bankruptcy Code.

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** /s/ Edward P. Cormican  
Signature of Debtor **Edward P. Cormican**

**X** /s/ Cheryl Ann Cormican  
Signature of Joint Debtor **Cheryl Ann Cormican**

Telephone Number (If not represented by attorney)

September 21, 2006

Date

### Signature of Attorney

**X** /s/ Mark E. Zaleski  
Signature of Attorney for Debtor(s)

Mark E. Zaleski  
Printed Name of Attorney for Debtor(s)

Mark E. Zaleski  
Firm Name

**10 North Galena Avenue**  
**Suite 220**  
**Freeport, IL 61032**

Address

Email: attyzaleski@cjrinc.com

815-233-0995 Fax: 815-232-3227  
Telephone Number

September 21, 2006  
Date

### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** \_\_\_\_\_  
Signature of Authorized Individual

\_\_\_\_\_  
Printed Name of Authorized Individual

\_\_\_\_\_  
Title of Authorized Individual

\_\_\_\_\_  
Date

### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by §1515 of title 11 are attached.

☐ Pursuant to §1511 of title 11, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X** \_\_\_\_\_  
Signature of Foreign Representative

\_\_\_\_\_  
Printed Name of Foreign Representative

\_\_\_\_\_  
Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

\_\_\_\_\_  
Printed Name and title, if any, of Bankruptcy Petition Preparer

\_\_\_\_\_  
Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

\_\_\_\_\_  
Address

**X** \_\_\_\_\_  
Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.*

In re Edward P. Cormican  
Cheryl Ann Cormican Debtor(s) Case No. \_\_\_\_\_

**FORM 1. VOLUNTARY PETITION**  
**Attachment A**

**Prior Bankruptcy Case Filings:**

**98-36673**

**Date Filed: 11/16/98(Chapter 13 filed by Mrs. Cormican)**

**Location: Northern District of Illinois, Eastern Division**

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Debtors

Case No. \_\_\_\_\_

Chapter **13**

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities."

			AMOUNTS SCHEDULED		
NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	<b>Yes</b>	<b>1</b>	<b>76,000.00</b>		
B - Personal Property	<b>Yes</b>	<b>4</b>	<b>25,150.00</b>		
C - Property Claimed as Exempt	<b>Yes</b>	<b>1</b>			
D - Creditors Holding Secured Claims	<b>Yes</b>	<b>1</b>		<b>50,000.00</b>	
E - Creditors Holding Unsecured Priority Claims	<b>Yes</b>	<b>1</b>		<b>0.00</b>	
F - Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>15</b>		<b>80,616.26</b>	
G - Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H - Codebtors	<b>Yes</b>	<b>1</b>			
I - Current Income of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			<b>2,865.00</b>
J - Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			<b>2,550.00</b>
Total Number of Sheets of ALL Schedules		<b>27</b>			
Total Assets			<b>101,150.00</b>		
Total Liabilities				<b>130,616.26</b>	

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **Edward P. Cormican,**  
**Cheryl Ann Cormican**

Debtors

Case No. \_\_\_\_\_

Chapter **13**

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES (28 U.S.C. § 159)**  
**[Individual Debtors Only]**

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	<b>0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	<b>0.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	<b>0.00</b>
Student Loan Obligations (from Schedule F)	<b>0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	<b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	<b>0.00</b>
TOTAL	<b>0.00</b>

**The foregoing information is for statistical purposes only under 28 U.S.C § 159.**

Form B6A  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Single family residence located at 2806 Rt. 73, Lena, IL	Joint tenant	J	76,000.00	50,000.00

Sub-Total > **76,000.00** (Total of this page)

Total > **76,000.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B. PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	<b>Cash</b>		<b>J</b>	<b>150.00</b>
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	<b>Joint checking account at Lena State Bank, Lena, IL</b>		<b>J</b>	<b>500.00</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.	<b>X</b>			
4. Household goods and furnishings, including audio, video, and computer equipment.	<b>Furniture, furnishings, appliances, and misc. other items.</b>		<b>J</b>	<b>3,500.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	<b>Books, pictures, videos, music cds and misc. other items</b>		<b>J</b>	<b>350.00</b>
6. Wearing apparel.	<b>Debtor's clothing</b>		<b>J</b>	<b>500.00</b>
7. Furs and jewelry.	<b>Rings, watches and misc. other items</b>		<b>J</b>	<b>350.00</b>
8. Firearms and sports, photographic, and other hobby equipment.	<b>Misc. recreational items</b>		<b>J</b>	<b>200.00</b>
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	<b>Term life policy</b>		<b>H</b>	<b>0.00</b>
	<b>Term life policy</b>		<b>W</b>	<b>0.00</b>
10. Annuities. Itemize and name each issuer.	<b>X</b>			

Sub-Total > **5,550.00**  
(Total of this page)

3 continuation sheets attached to the Schedule of Personal Property

Form B6B  
(10/05)In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B. PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	<b>X</b>			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	<b>401k</b>		<b>W</b>	<b>Unknown</b>
		<b>Retirement account with New York Life (401k)</b>	<b>W</b>	<b>6,000.00</b>
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	<b>X</b>			
14. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	<b>X</b>			
16. Accounts receivable.	<b>X</b>			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.		<b>Debtors children owe approx. \$7000 but the debt is uncollectible</b>	<b>J</b>	<b>0.00</b>
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<b>X</b>			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		<b>Possible claim for social security</b>	<b>H</b>	<b>Unknown</b>

Sub-Total > **6,000.00**  
(Total of this page)

Sheet 1 of 3 continuation sheets attached  
to the Schedule of Personal Property

Form B6B  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

## **SCHEDULE B. PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
23. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		<b>1998 Dodge Dakota with 150,000 miles</b>	<b>J</b>	<b>2,000.00</b>
		<b>1989 Mercury Marquis</b>	<b>J</b>	<b>1,000.00</b>
		<b>1986 Chevy S-10</b>	<b>J</b>	<b>500.00</b>
		<b>1988 Harley Davidson FLT Tour Glide motorcycle</b>	<b>J</b>	<b>8,500.00</b>
26. Boats, motors, and accessories.	<b>X</b>			
27. Aircraft and accessories.	<b>X</b>			
28. Office equipment, furnishings, and supplies.	<b>X</b>			
29. Machinery, fixtures, equipment, and supplies used in business.		<b>Log splitter, chain saw, misc woodcutting tools</b>	<b>J</b>	<b>1,000.00</b>
30. Inventory.	<b>X</b>			
31. Animals.	<b>X</b>			
32. Crops - growing or harvested. Give particulars.	<b>X</b>			
33. Farming equipment and implements.	<b>X</b>			
34. Farm supplies, chemicals, and feed.	<b>X</b>			
35. Other personal property of any kind not already listed. Itemize.		<b>Misc. household tools &amp; implements</b>	<b>J</b>	<b>250.00</b>

Sub-Total > **13,250.00**  
(Total of this page)

Sheet 2 of 3 continuation sheets attached  
to the Schedule of Personal Property

Form B6B  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE B. PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
		<b>lawn mower, misc. lawn and garden equipment</b>	<b>J</b>	<b>350.00</b>

Sheet **3** of **3** continuation sheets attached  
to the Schedule of Personal Property

Sub-Total > **350.00**  
(Total of this page)  
Total > **25,150.00**

(Report also on Summary of Schedules)

Form B6C  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. §522(b)(2)

☒ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$125,000.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<b><u>Real Property</u></b>			
Single family residence located at 2806 Rt. 73, Lena, IL	735 ILCS 5/12-901	30,000.00	76,000.00
<b><u>Cash on Hand</u></b>			
Cash	735 ILCS 5/12-1001(b)	150.00	150.00
<b><u>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</u></b>			
Joint checking account at Lena State Bank, Lena, IL	735 ILCS 5/12-1001(b)	500.00	500.00
<b><u>Household Goods and Furnishings</u></b>			
Furniture, furnishings, appliances, and misc. other items.	735 ILCS 5/12-1001(b)	3,500.00	3,500.00
<b><u>Books, Pictures and Other Art Objects; Collectibles</u></b>			
Books, pictures, videos, music cds and misc. other items	735 ILCS 5/12-1001(b)	350.00	350.00
<b><u>Wearing Apparel</u></b>			
Debtor's clothing	735 ILCS 5/12-1001(a)	500.00	500.00
<b><u>Furs and Jewelry</u></b>			
Rings, watches and misc. other items	735 ILCS 5/12-1001(b)	350.00	350.00
<b><u>Firearms and Sports, Photographic and Other Hobby Equipment</u></b>			
Misc. recreational items	735 ILCS 5/12-1001(b)	200.00	200.00
<b><u>Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans</u></b>			
401k	735 ILCS 5/12-1006	100%	Unknown
Retirement account with New York Life (401k)	735 ILCS 5/12-1006	6,000.00	6,000.00
<b><u>Automobiles, Trucks, Trailers, and Other Vehicles</u></b>			
1998 Dodge Dakota with 150,000 miles	735 ILCS 5/12-1001(c)	2,000.00	2,000.00
1989 Mercury Marquis	735 ILCS 5/12-1001(c)	1,000.00	1,000.00
<b><u>Machinery, Fixtures, Equipment and Supplies Used in Business</u></b>			
Log splitter, chain saw, misc woodcutting tools	735 ILCS 5/12-1001(b)	1,000.00	1,000.00
<b><u>Other Personal Property of Any Kind Not Already Listed</u></b>			
Misc. household tools & implements	735 ILCS 5/12-1001(b)	250.00	250.00
lawn mower, misc. lawn and garden equipment	735 ILCS 5/12-1001(b)	350.00	350.00

Total: **46,150.00** **92,150.00**

0 continuation sheets attached to Schedule of Property Claimed as Exempt

Form B6D  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN					
Account No.		<b>1998</b>					
<b>Citizens State Bank</b> <b>102 West Main Street</b> <b>PO Box 396</b> <b>Lena, IL 61048</b>	<b>J</b>	<b>Mortgage</b>  <b>Single family residence located at 2806</b> <b>Rt. 73, Lena, IL and 1988 Harley</b> <b>Davidson</b>					
		Value \$ <b>76,000.00</b>				<b>50,000.00</b>	<b>0.00</b>
Account No.							
		Value \$					
Account No.							
		Value \$					
Account No.							
		Value \$					

0 continuation sheets attached

Subtotal  
(Total of this page)

**50,000.00**

Total  
(Report on Summary of Schedules)

**50,000.00**

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community". If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,925\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,225\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\*Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Form B6F  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. §112; Fed.R.Bankr.P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community maybe liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>3001548050</b>  <b>American World Financial Network Credit Card PO Box 659705 San Antonio, TX 78265-9705</b>	<b>H</b>	<b>Opened 10/01/99 Last Active 5/06/02 Credit card purchases</b>				<b>1,465.00</b>
Account No.  <b>Representing: American</b>		<b>Law Offices of Mitchell N. Kay 7 Penn Plaza New York, NY 10003-3995</b>				
Account No. <b>054297592018390091</b>  <b>American Express PO Box 297871 Fort Lauderdale, FL 33329</b>	<b>H</b>	<b>Opened 11/01/99 ChargeAccount</b>				<b>2,833.00</b>
Account No.  <b>Representing: American Express</b>		<b>American Express PO Box 360001 Ft. Lauderdale, FL 33336-0001</b>				
Subtotal (Total of this page)						<b>4,298.00</b>

14 continuation sheets attached

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Account No. 7012137040359206	H	Opened 7/01/01 Last Active 11/10/03 Loan				557.00	
American General Finance 1888 S West Ave Freeport, IL 61032							
Account No.		American General Finance POB 3251 Evansville, IN 47731					
Representing: American General Finance							
Account No.		Client Services, Inc. 3451 Harry Truman Blvd. Saint Charles, MO 63301-4047					
Representing: American General Finance							
Account No.		Sentry Credit POB 12070 Everett, WA 98206					
Representing: American General Finance							
Account No. 14470584	W	Opened 8/01/03 Collection for SBC				521.00	
Asset Acceptance LLC PO Box 2036 Warren, MI 48090-2036							
Sheet no. 1 of 14 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	1,078.00

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>18-2551124</b>	<b>J</b>					
<b>Associated St. James Radiologists PO Box 3597 Springfield, IL 62708-3597</b>						
						<b>230.00</b>
Account No. <b>4121-7416-2344-7229</b>	<b>H</b>					
<b>Capital One Bank PO Box 85520 Richmond, VA 23285</b>						
						<b>4,236.00</b>
Account No.						
<b>Representing: Capital One Bank</b>						
Account No.						
<b>Representing: Capital One Bank</b>						
Account No.						
<b>Representing: Capital One Bank</b>						
Sheet no. <b>2</b> of <b>14</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>4,466.00</b>

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>Representing: Capital One Bank</b>		<b>NCO Financial Services POB 41417 Dept. 99 Philadelphia, PA 19101</b>				
Account No. <b>CMU02564</b> <b>Castilian Music c/o AAA Collectors, Inc. 2950 N. Academy Blvd. Colorado Springs, CO 80917</b>		<b>W</b> <b>Opened 1/01/02 Collection Castilian Music</b>				<b>68.00</b>
Account No. <b>4826</b> <b>CHGO HTS Med Consultants PO Box 344 Flossmoor, IL 60422</b>		<b>J</b> <b>Medical expenses</b>				<b>675.00</b>
Account No. <b>9900594</b> <b>Chicago Heights - Fire Dept. c/o NCO Financial Systems Inc. PO Box 42959 Philadelphia, PA 19101-2959</b>		<b>J</b> <b>Medical expenses</b>				<b>250.00</b>
Account No. <b>206214</b> <b>Crusaders Central Clinic Assoc. PO Box 5311 Rockford, IL 61125-0311</b>		<b>H</b> <b>Medical expenses</b>				<b>275.00</b>
Sheet no. <u>3</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal (Total of this page)</b>
						<b>1,268.00</b>

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Representing: Crusaders Central Clinic Assoc.</b>						
		<b>Rockford Mercantile Agency 2502 South Alpine Road PO Box 5847 Rockford, IL 61108</b>				
Account No. <b>57244577</b>						
<b>Dish Network Department 0063 Palatine, IL 60055-0063</b>		<b>H</b>				
		<b>Opened 9/01/05 Last Active 9/18/05 Utilities</b>				<b>46.00</b>
Account No.						
<b>Representing: Dish Network</b>						
		<b>CBE Group 131 Towe Park Dr., Suite 1 Waterloo, IA 50702</b>				
Account No. <b>139700</b>						
<b>Dr. Stephen Petras PO Box 146 Stockton, IL 61085</b>		<b>H</b>				
		<b>Opened 8/01/02 Medical expenses</b>				<b>139.00</b>
Account No.						
<b>Representing: Dr. Stephen Petras</b>						
		<b>Tri-State Adjustments 440 Challenge St Freeport, IL 61032</b>				
Sheet no. <b>4</b> of <b>14</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>185.00</b>

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>24159</b>						
<b>Freeport Health Network Central Business Office PO Box 268 Freeport, IL 61032</b>		<b>H</b>				<b>80.00</b>
Account No.						
<b>Representing: Freeport Health Network</b>						
Account No.						
<b>Representing: Freeport Health Network</b>						
Account No. <b>Various accounts</b>						
<b>Freeport Health Network/Hospital Central Business Office PO Box 857 Freeport, IL 61032-0857</b>		<b>H</b>				<b>5,750.00</b>
Account No.						
<b>Representing: Freeport Health Network/Hospital</b>						
Sheet no. <b>5</b> of <b>14</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>5,830.00</b>

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>Representing: Freeport Health Network/Hospital</b>			<b>Tri-State Adjustments 440 Challenge St Freeport, IL 61032</b>			
Account No. <b>12279200</b> <b>Illinois/Indiana Emergency c/o NCO- Medclr PO Box 8547 Philadelphia, PA 19101</b>		<b>W</b>	<b>Opened 11/01/01 Collection Illinois/Indiana Em-</b>			<b>156.00</b>
Account No. <b>165083</b> <b>Indiana Department of Revenue PO Box 1685 Indianapolis, IN 46206-1685</b>		<b>H</b>	<b>Indiana State Tax</b>			<b>293.00</b>
Account No. <b>CORED000</b> <b>Indiana Institute of Cardiology 1000 Washington St. Michigan City, IN 46360</b>		<b>H</b>	<b>Medical expenses</b>			<b>35.00</b>
Account No. <b>199901609248</b> <b>Ingalls Memorial Hosp. c/o OSI Collection Servicesm Inc. PO Box 959 Brookfield, WI 53008-0959</b>		<b>J</b>	<b>Collection</b>			<b>360.00</b>
Sheet no. <u>6</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>844.00</b>

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>328-58-1079</b>	<b>W</b>	<b>Federal taxes for 2000</b>				<b>1,404.26</b>
<b>Internal Revenue Service - ACS PO Box 219236 Kansas City, MO 64121-9236</b>						
Account No.		<b>Internal Revenue Service 230 South Dearborn Stop5016 Chicago, IL 60604</b>				
<b>Representing: Internal Revenue Service - ACS</b>						
Account No. <b>1234</b>	<b>H</b>	<b>Credit card purchases</b>				<b>1,600.00</b>
<b>Lena State Bank 915 South Logan Street PO Box 456 Lena, IL 61048</b>						
Account No. <b>Unknown</b>	<b>J</b>	<b>Collection</b>				<b>55.00</b>
<b>Lowell High School 2051 E. Commercial Ave. Lowell, IN 46356-2197</b>						
Account No. <b>Unknown</b>	<b>J</b>	<b>Medical expenses</b>				<b>200.00</b>
<b>Lundholm Surgical Group, Ltd. PO Box 4117 Rockford, IL 61110</b>						
Sheet no. <u>7</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						<b>3,259.26</b>

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>3270370005714882</b>	<b>H</b>	<b>Opened 8/01/05 Utilities</b>				<b>374.00</b>
<b>MCI Residential Service PO Box 17890 Denver, CO 80217-0890</b>						
Account No.		<b>Midland Credit Management Dept. 8870 Los Angeles, CA 90084</b>				
<b>Representing: MCI Residential Service</b>						
Account No.		<b>Park Dansan PO Box 248 Gastonia, NC 28053-0248</b>				
<b>Representing: MCI Residential Service</b>						
Account No. <b>1305008</b>	<b>J</b>	<b>Medical expenses</b>				<b>325.00</b>
<b>Medtrust Healthcare Services Co. PO Box 891660 Dallas, TX 75389-1660</b>						
Account No. <b>Unknown</b>	<b>J</b>	<b>Collection</b>				<b>40.00</b>
<b>National Credit Audit Corp. 8512 Allen Rd. Peoria, IL 61615</b>						
Sheet no. <u>8</u> of <u>14</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>739.00</b>
Subtotal (Total of this page)						<b>739.00</b>

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>7213686</b>		W				
<b>Northern Illinois Imaging PO Box 1733 Rockford, IL 61110-0233</b>						
						<b>5,334.00</b>
Account No.						
<b>Representing: Northern Illinois Imaging</b>						
Account No.						
<b>Northland Group POB 390846 Minneapolis, MN 55439</b>						
						<b>5,000.00</b>
Account No.						
<b>Representing: Northland Group</b>						
Account No.						
<b>Representing: Northland Group</b>						
Sheet no. <b>9</b> of <b>14</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>10,334.00</b>

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G U E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Account No. 3451209001	H	Medical expenses				1,850.00	
Porter Hospital 814 LaPorte Ave. Valparaiso, IN 46383-5860							
Account No.		Horizon Financial Management 8585 S. Broadway, Suite 815 Merrillville, IN 46410					
Representing: Porter Hospital							
Account No.		United Collection Bureau POB 140190 Toledo, OH 43614					
Representing: Porter Hospital							
Account No. 1671	J	Medical expenses				40.00	
Pramod K. Anand, M.D. Dinesh K. Jain, M.D. 71 W. 156th Street Harvey, IL 60426							
Account No. 0002150028-5	W	Services rendered				5.00	
Primeco Personal Communications PO Box 672110 Dallas, TX 75267-2110							
Sheet no. 10 of 14 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	1,895.00

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. <b>639000264</b>						
<b>Progressive Insurance Company c/o NCO Financial PO Box 41466 Philadelphia, PA 19101</b>		<b>H</b>				<b>75.00</b>
Account No. <b>4479-4125-2460-2332</b>						
<b>Providian PO Box 660786 Dallas, TX 75266-0786</b>		<b>H</b>				<b>4,940.00</b>
Account No.						
<b>Representing: Providian</b>						
Account No.						
<b>Representing: Providian</b>						
Account No.						
<b>Representing: Providian</b>						
Sheet no. <b>11</b> of <b>14</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>5,015.00</b>

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>Representing: Providian</b>						
		<b>Wolpoff &amp; Abramson, L.L.P. Two Irvington Centre 702 King Farm Blvd Rockville, MD 20850</b>				
Account No. <b>103341</b>						
<b>Radiologic Associates NW IN INC 825 E. Lincolnway Valparaiso, IN 46383-5803</b>		<b>H</b>				
						<b>235.00</b>
Account No. <b>7213525</b>						
<b>Radiology Consultants of Rockford PO Box 4542 Rockford, IL 61110</b>		<b>W</b>				
						<b>1,430.00</b>
Account No.						
<b>Representing: Radiology Consultants of Rockford</b>						
		<b>Mutual Management Services 401 East State Street - 2nd Floor PO Box 4777 Rockford, IL 61110</b>				
Account No. <b>505 9965.Fox</b>						
<b>Smits Funeral Homes, LTD c/o Kenneth J. Donkel 9697 W. 191st St., Suite 200 Mokena, IL 60448</b>		<b>W</b>				
		<b>Collection</b>				<b>14,350.00</b>
Sheet no. <b>12</b> of <b>14</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>16,015.00</b>

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 4067455	W	Opened 7/01/01 Collection St James Hosp				17,000.00
St. James Hospital c/o Mutual Hospital Services, Inc. 2525 N. Shadeland Ave., Indianapolis, IN 46219						
Account No.		St. James Hospital & Health Center PO Box 580 Chicago Heights, IL 60412				
Representing: St. James Hospital						
Account No. 4312340	W	Opened 11/01/01 Collection St Margaret Mercy Ho				350.00
St. Margaret Mercy Hospital c/o Mutual Hospital Services, Inc. 2525 N. Shadeland Ave., Indianapolis, IN 46219						
Account No. 895114	W	Medical expenses				650.00
Surburban Heights Medical Center PO Box 515 Chicago Heights, IL 60412-0515						
Account No. L036830024	W	Medical expenses				325.00
SwedishAmerican Hospital PO Box 4448 Rockford, IL 61110-0948						
Sheet no. 13 of 14 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						18,325.00

Form B6F - Cont.  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		<b>Property settlement</b>				
<b>Teresa Burton C/O Attorney Mary Vincent POB 685 Warren, IL 61087</b>	<b>J</b>					<b>6,000.00</b>
Account No. <b>Various accounts</b>		<b>Medical expenses 0039140</b>				
<b>The Monroe Clinic 2009 5th Street Monroe, WI 53566-1575</b>	<b>H</b>					<b>225.00</b>
Account No. <b>1014962</b>		<b>Opened 10/01/05 Collection Unity Physician Grou</b>				
<b>Unity Physician Group c/o Central Indiana Credit &amp; Coll. PO Box 4779 Bloomington, IN 47402</b>	<b>H</b>					<b>490.00</b>
Account No. <b>Unknown</b>		<b>Utilities Phone #: 8153694085</b>				
<b>Verizon North PO Box 920041 Dallas, TX 75392-0041</b>	<b>H</b>					<b>350.00</b>
Account No.		<b>NCO Financial Systems, Inc. PO Box 105031 Atlanta, GA 30348</b>				
<b>Representing: Verizon North</b>						
Sheet no. <b>14</b> of <b>14</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal (Total of this page)</b> <b>7,065.00</b>
(Report on Summary of Schedules)						<b>Total 80,616.26</b>

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

## **SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,  
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.  
State whether lease is for nonresidential real property.  
State contract number of any government contract.

Form B6H  
(10/05)

In re **Edward P. Cormican,  
Cheryl Ann Cormican**

Case No. \_\_\_\_\_

Debtors

## SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

0 continuation sheets attached to Schedule of Codebtors

Form B61  
(10/05)

In re **Edward P. Cormican**  
**Cheryl Ann Cormican** Debtor(s) Case No. \_\_\_\_\_

### SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12, or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status:  <b>Married</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP: <b>None.</b>	AGE:
Employment:	DEBTOR	SPOUSE
Occupation		
Name of Employer	<b>Stephenson County Nursing Home</b>	
How long employed	<b>8 Months</b>	
Address of Employer	<b>2946 South Walnut Freeport, IL 61032</b>	

INCOME: (Estimate of average monthly income)	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (Prorate if not paid monthly.)	\$ <u>0.00</u>	\$ <u>3,900.00</u>
2. Estimate monthly overtime	\$ <u>0.00</u>	\$ <u>0.00</u>
3. SUBTOTAL	\$ <u>0.00</u>	\$ <u>3,900.00</u>
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security	\$ <u>0.00</u>	\$ <u>800.00</u>
b. Insurance	\$ <u>0.00</u>	\$ <u>60.00</u>
c. Union dues	\$ <u>0.00</u>	\$ <u>0.00</u>
d. Other (Specify): <u>IMRF</u>	\$ <u>0.00</u>	\$ <u>175.00</u>
	\$ <u>0.00</u>	\$ <u>0.00</u>
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ <u>0.00</u>	\$ <u>1,035.00</u>
6. TOTAL NET MONTHLY TAKE HOME PAY	\$ <u>0.00</u>	\$ <u>2,865.00</u>
7. Regular income from operation of business or profession or farm. (Attach detailed statement)	\$ <u>0.00</u>	\$ <u>0.00</u>
8. Income from real property	\$ <u>0.00</u>	\$ <u>0.00</u>
9. Interest and dividends	\$ <u>0.00</u>	\$ <u>0.00</u>
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ <u>0.00</u>	\$ <u>0.00</u>
11. Social security or other government assistance (Specify): _____	\$ <u>0.00</u>	\$ <u>0.00</u>
_____	\$ <u>0.00</u>	\$ <u>0.00</u>
12. Pension or retirement income	\$ <u>0.00</u>	\$ <u>0.00</u>
13. Other monthly income (Specify): _____	\$ <u>0.00</u>	\$ <u>0.00</u>
_____	\$ <u>0.00</u>	\$ <u>0.00</u>
14. SUBTOTAL OF LINES 7 THROUGH 13	\$ <u>0.00</u>	\$ <u>0.00</u>
15. TOTAL MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$ <u>0.00</u>	\$ <u>2,865.00</u>
16. TOTAL COMBINED MONTHLY INCOME: \$ <u>2,865.00</u>	(Report also on Summary of Schedules)	
17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:		

Form B6J  
(10/05)

In re **Edward P. Cormican**  
**Cheryl Ann Cormican** Debtor(s) Case No. \_\_\_\_\_

## SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)		\$	<b>700.00</b>
a. Are real estate taxes included?	Yes <u><b>X</b></u> No ____		
b. Is property insurance included?	Yes <u><b>X</b></u> No ____		
2. Utilities:		\$	<b>250.00</b>
a. Electricity and heating fuel		\$	<b>75.00</b>
b. Water and sewer		\$	<b>75.00</b>
c. Telephone		\$	<b>75.00</b>
d. Other <u><b>cable/internet</b></u>		\$	<b>75.00</b>
3. Home maintenance (repairs and upkeep)		\$	<b>100.00</b>
4. Food		\$	<b>400.00</b>
5. Clothing		\$	<b>125.00</b>
6. Laundry and dry cleaning		\$	<b>75.00</b>
7. Medical and dental expenses		\$	<b>100.00</b>
8. Transportation (not including car payments)		\$	<b>350.00</b>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.		\$	<b>125.00</b>
10. Charitable contributions		\$	<b>0.00</b>
11. Insurance (not deducted from wages or included in home mortgage payments)		\$	<b>0.00</b>
a. Homeowner's or renter's		\$	<b>0.00</b>
b. Life		\$	<b>0.00</b>
c. Health		\$	<b>0.00</b>
d. Auto		\$	<b>100.00</b>
e. Other _____		\$	<b>0.00</b>
12. Taxes (not deducted from wages or included in home mortgage payments)		\$	<b>0.00</b>
(Specify) _____		\$	<b>0.00</b>
13. Installment payments: (In chapter 11, 12 and 13 cases, do not list payments to be included in the plan.)			
a. Auto		\$	<b>0.00</b>
b. Other _____		\$	<b>0.00</b>
c. Other _____		\$	<b>0.00</b>
d. Other _____		\$	<b>0.00</b>
14. Alimony, maintenance, and support paid to others		\$	<b>0.00</b>
15. Payments for support of additional dependents not living at your home		\$	<b>0.00</b>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)		\$	<b>0.00</b>
17. Other _____		\$	<b>0.00</b>
Other _____		\$	<b>0.00</b>
18. TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)		\$	<b>2,550.00</b>

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

### 20. STATEMENT OF MONTHLY NET INCOME

a. Total monthly income from Line 16 of Schedule I	\$	<b>2,865.00</b>
b. Total monthly expenses from Line 18 above	\$	<b>2,550.00</b>
c. Monthly net income (a. minus b.)	\$	<b>315.00</b>

Official Form 6-Decl.  
(10/05)

**United States Bankruptcy Court  
Northern District of Illinois**

In re **Edward P. Cormican**  
**Cheryl Ann Cormican** Debtor(s) Case No. \_\_\_\_\_  
Chapter **13**

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **29** sheets *[total shown on summary page plus 2]*, and that they are true and correct to the best of my knowledge, information, and belief.

Date **September 21, 2006** Signature **/s/ Edward P. Cormican**  
**Edward P. Cormican**  
Debtor

Date **September 21, 2006** Signature **/s/ Cheryl Ann Cormican**  
**Cheryl Ann Cormican**  
Joint Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

Official Form 7  
(10/05)

United States Bankruptcy Court  
Northern District of Illinois

In re **Edward P. Cormican**  
**Cheryl Ann Cormican**

Debtor(s)

Case No.  
Chapter

**13**

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None  
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$33,000.00	Wife's approx. gross YTD income from employment
\$29,000.00	2005
\$52,000.00	2004
\$1,300.00	2005 -- Income from sale of flea market items for Husband

## 2. Income other than from employment or operation of business

None ☐ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>\$26,000.00</b>	<b>1/06 Approx. work comp settlement for Husband</b>

## 3. Payments to creditors

None ☐ *Complete a. or b., as appropriate, and c.*

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
<b>Citizens State Bank 102 West Main Street PO Box 396 Lena, IL 61048</b>	<b>Monthly mortgage payment</b>	<b>\$700.00</b>	<b>\$50,000.00</b>

None ☒ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,000. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
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None ☐ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
<b>Al Little St. Louis, MO Friend</b>	<b>1/6</b>	<b>\$4,000.00</b>	<b>\$0.00</b>
<b>Kurt Boland Freeport, IL Friend</b>	<b>1/06</b>	<b>\$1,100.00</b>	<b>\$0.00</b>
<b>Margaret Cormican Branson, MO Mother</b>	<b>Over past 12 months--less than \$1000</b>	<b>\$1,000.00</b>	<b>\$0.00</b>
<b>Jewells Taylor Denver, CO</b>	<b>1/06</b>	<b>\$1,000.00</b>	<b>\$0.00</b>

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

- None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Palisades Collection LLC v. Edward Cormican 05 SC 561	Civil Suit	15th Judicial Circuit Court Stephenson County, Freeport, Illinois.	Judgment entered
Edward Cormican v. Teresa Cormican, 2000D32	Dissolution	15th Judicial Circuit Court, Stephenson County, Freeport, IL	Judgment entered
Citizens State Bank v. Edward and Cheryl Cormican, 05CH113	Foreclosre	15th Judicial Circuit Court, Stephenson County, Freeport, Illinois.	Closed
Smits Funeral Home v. Cheryl Fox, 01M6 287	Civil suit	Circuit Court of Cook County, Municipal Division	Pending

- None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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#### 5. Repossessions, foreclosures and returns

- None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
---	--	--------------------------------------

#### 6. Assignments and receiverships

- None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
------------------------------	-----------------------	-----------------------------------

- None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
----------------------------------	--	------------------	--------------------------------------

### 7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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### 8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
-----------------------------------	--	--------------

### 9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Attorney Mark Zaleski 10 N. Galena #220 Freeport, IL 61032	2/14/06	\$1116 for atty fees; \$274 for filing fee; \$110 for credit counseling/education fees

### 10. Other transfers

None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
Various unknown third parties		In the summer of 2005, Debtors had a garage sale wherein they sold less than \$500 of personal effects to third parties
Unknown individuals	Summer of 2005	Debtors sold two junker cars for approx. \$500 a piece

None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
-------------------------------	------------------------	---

### 11. Closed financial accounts

None ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
---------------------------------	--	---------------------------------------

### 12. Safe deposit boxes

None ☐ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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### 13. Setoffs

None ☐ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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### 14. Property held for another person

None ☐ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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### 15. Prior address of debtor

None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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### 16. Spouses and Former Spouses

None ☐ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

# 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None ☐ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None ☐ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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# 18 . Nature, location and name of business

- None ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER I.D. NO.	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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- None ☐ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or

owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

### 19. Books, records and financial statements

None ☐ a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None ☐ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None ☐ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None ☐ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

### 20. Inventories

None ☐ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY  
(Specify cost, market or other basis)

None ☐ b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY  
RECORDS

### 21 . Current Partners, Officers, Directors and Shareholders

None ☐ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None ☐ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE  
OF STOCK OWNERSHIP

### 22 . Former partners, officers, directors and shareholders

None ☐ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None ☐ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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**23 . Withdrawals from a partnership or distributions by a corporation**

None ☐ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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**24. Tax Consolidation Group.**

None ☐ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER (EIN)
----------------------------	--------------------------------------

**25. Pension Funds.**

None ☐ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND	TAXPAYER IDENTIFICATION NUMBER (EIN)
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**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date September 21, 2006

Signature /s/ Edward P. Cormican  
**Edward P. Cormican**  
Debtor

Date September 21, 2006

Signature /s/ Cheryl Ann Cormican  
**Cheryl Ann Cormican**  
Joint Debtor

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571*

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **Edward P. Cormican**  
**Cheryl Ann Cormican**

Debtor(s)

Case No.  
 Chapter

**13**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$	<u><b>2,500.00</b></u>
Prior to the filing of this statement I have received.....	\$	<u><b>1,116.00</b></u>
Balance Due.....	\$	<u><b>1,384.00</b></u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the debtors in any dischargeability actions, lien avoidances, relief from stay actions or any other adversary proceeding. Negotiations with secured creditors to reduce collateral to market value or to modify original loan. Negotiation, preparation and filing of reaffirmation agreements. Preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: **September 21, 2006**

**/s/ Mark E. Zaleski**

**Mark E. Zaleski**  
**Mark E. Zaleski**  
**10 North Galena Avenue**  
**Suite 220**  
**Freeport, IL 61032**  
**815-233-0995 Fax: 815-232-3227**  
**attyzaleski@cjrinc.com**

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS**

**RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN  
CHAPTER 13 DEBTORS AND THEIR ATTORNEYS  
(Model Retention Agreement)**

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure—but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to expect certain services to be performed by their attorneys, but again, debtors have responsibilities to their attorneys also. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved the following agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys. By signing this agreement, debtors and their attorneys accept these responsibilities.

***BEFORE THE CASE IS FILED***

**THE DEBTOR AGREES TO:**

1. Discuss with the attorney the debtor's objectives in filing the case.
2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

**THE ATTORNEY AGREES TO:**

1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)

4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
6. Advise the debtor of the need to maintain appropriate insurance.

***AFTER THE CASE IS FILED***

**THE DEBTOR AGREES TO:**

1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor will also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
3. Notify the attorney of any change in the debtor's address or telephone number.
4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, lottery winnings, or an inheritance).
6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.

**THE ATTORNEY AGREES TO:**

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.

3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
7. Timely prepare, file, and serve any necessary amended statements and schedules and any change of address, in accordance with information provided by the debtor.
8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
9. Be available to respond to the debtor's questions throughout the term of the plan.
10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
12. Object to improper or invalid claims.
13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
14. Timely respond to motions for relief from stay.
15. Prepare, file, and serve all appropriate motions to avoid liens.
16. Provide any other legal services necessary for the administration of the case before the bankruptcy court.

ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES [*Check one option.*]

☒ Option A: flat fee through confirmation

☐ Option B: flat fee through case closing

1a. *Pre-confirmation services.* Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case, unless otherwise ordered by the court. For all of the services outlined above, required to be provided before confirmation of a plan, the attorney will be paid a fee of \$ 2,500.00. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for pre-confirmation services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a fee of \$ N/A. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

1b. *Post-confirmation services.* Compensation for services required after confirmation will be in such amounts as are allowed by the court, on application accompanied by an itemization of the services rendered, showing the date, time, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified that the debtor may appear in court to object.

2. *Early termination of the case.* Fees payable under the provisions set out above are not refundable in the event that the case is dismissed before confirmation (Option A) or completion of plan payments (Option B), unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If a dismissal is due to such a failure by the attorney, the court may order a refund of fees on motion by the debtor.

3. *Retainers.* The attorney may receive a retainer or other payment before filing the case, but may not receive fees directly from the debtor after the filing of the case. In any application for fees, whether or not requiring an itemization, the attorney shall disclose to the court any fees paid by the debtor prior to the case filing.

4. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.

5. *Improper conduct by the debtor.* If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise not engaging in proper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.

6. *Discharge of the attorney.* The debtor may discharge the attorney at any time.

Date:

September 21, 2006

**Total fee to be paid for attorney's services: \$ 2,500.00**  
**(Do not sign if this line is blank.)**

Signed:

/s/ Edward P. Cormican

Edward P. Cormican

/s/ Cheryl Ann Cormican

Cheryl Ann Cormican

Debtor(s)

/s/ Mark E. Zaleski

Mark E. Zaleski

Attorney for Debtor(s)

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

**1. Services Available from Credit Counseling Agencies**

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)**

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)**

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

**Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

<b>Mark E. Zaleski</b>	X <b>/s/ Mark E. Zaleski</b>	<b>September 21, 2006</b>
Printed Name of Attorney	Signature of Attorney	Date
Address:		
<b>10 North Galena Avenue</b>		
<b>Suite 220</b>		
<b>Freeport, IL 61032</b>		
<b>815-233-0995</b>		

**Certificate of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read this notice.

<b>Edward P. Cormican</b>	X <b>/s/ Edward P. Cormican</b>	<b>September 21, 2006</b>
<b>Cheryl Ann Cormican</b>	Signature of Debtor	Date
Printed Name of Debtor		
Case No. (if known) _____	X <b>/s/ Cheryl Ann Cormican</b>	<b>September 21, 2006</b>
	Signature of Joint Debtor (if any)	Date

**United States Bankruptcy Court  
Northern District of Illinois**

In re Edward P. Cormican  
Cheryl Ann Cormican Debtor(s) Case No. \_\_\_\_\_  
Chapter 13

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors: 72

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: September 21, 2006 /s/ Edward P. Cormican  
Edward P. Cormican  
Signature of Debtor

Date: September 21, 2006 /s/ Cheryl Ann Cormican  
Cheryl Ann Cormican  
Signature of Debtor

Alliance One  
1160 Centre Point Drive  
Saint Paul, MN 55120

Allied Business Accounts, Inc.  
300 1/2 South Second Street  
PO Box 1600  
Clinton, IA 52733-1600

American  
World Financial Network Credit Card  
PO Box 659705  
San Antonio, TX 78265-9705

American Express  
PO Box 297871  
Fort Lauderdale, FL 33329

American Express  
PO Box 360001  
Ft. Lauderdale, FL 33336-0001

American General Finance  
1888 S West Ave  
Freeport, IL 61032

American General Finance  
POB 3251  
Evansville, IN 47731

Asset Acceptance LLC  
PO Box 2036  
Warren, MI 48090-2036

Associated Recovery Systems  
PO Box 469048  
Escondido, CA 92046-9048

Associated St. James Radiologists  
PO Box 3597  
Springfield, IL 62708-3597

Blatt, Hasenmiller, et al  
211 Landmark Drive, Suite E5  
Normal, IL 61761

Blatt, Hasenmiller, Leibsker  
and Moore  
125 S, Wacker Dr., Suite 400  
Chicago, IL 60606

Capital One  
Bankruptcy Department  
PO Box 85167  
Richmond, VA 23285-5167

Capital One Bank  
PO Box 85520  
Richmond, VA 23285

Castilian Music  
c/o AAA Collectors, Inc.  
2950 N. Academy Blvd.  
Colorado Springs, CO 80917

CBE Group  
131 Towe Park Dr., Suite 1  
Waterloo, IA 50702

CHGO HTS Med Consultants  
PO Box 344  
Flossmoor, IL 60422

Chicago Heights - Fire Dept.  
c/o NCO Financial Systems Inc.  
PO Box 42959  
Philadelphia, PA 19101-2959

Citizens State Bank  
102 West Main Street  
PO Box 396  
Lena, IL 61048

Client Services, Inc.  
3451 Harry Truman Blvd.  
Saint Charles, MO 63301-4047

Creditor Services  
POB 4  
Clinton, IA 52733

Crusaders Central Clinic Assoc.  
PO Box 5311  
Rockford, IL 61125-0311

Dish Network  
Department 0063  
Palatine, IL 60055-0063

Dr. Stephen Petras  
PO Box 146  
Stockton, IL 61085

Freeport Health Network  
Central Business Office  
PO Box 268  
Freeport, IL 61032

Freeport Health Network/Hospital  
Central Business Office  
PO Box 857  
Freeport, IL 61032-0857

Horizon Financial Management  
8585 S. Broadway, Suite 815  
Merrillville, IN 46410

Illinois/Indiana Emergency  
c/o NCO- Medclr  
PO Box 8547  
Philadelphia, PA 19101

Indiana Department of Revenue  
PO Box 1685  
Indianapolis, IN 46206-1685

Indiana Institute of Cardiology  
1000 Washington St.  
Michigan City, IN 46360

Ingalls Memorial Hosp.  
c/o OSI Collection Servicesm Inc.  
PO Box 959  
Brookfield, WI 53008-0959

Internal Revenue Service  
230 South Dearborn  
Stop 5016  
Chicago, IL 60604

Internal Revenue Service - ACS  
PO Box 219236  
Kansas City, MO 64121-9236

Law Offices of Mitchell N. Kay  
7 Penn Plaza  
New York, NY 10003-3995

Lena State Bank  
915 South Logan Street  
PO Box 456  
Lena, IL 61048

Lowell High School  
2051 E. Commercial Ave.  
Lowell, IN 46356-2197

Lundholm Surgical Group, Ltd.  
PO Box 4117  
Rockford, IL 61110

MCI Residential Service  
PO Box 17890  
Denver, CO 80217-0890

Medtrust Healthcare Services Co.  
PO Box 891660  
Dallas, TX 75389-1660

Midland Credit Management  
Dept. 8870  
Los Angeles, CA 90084

Mutual Management Services  
401 East State Street - 2nd Floor  
PO Box 4777  
Rockford, IL 61110

National Credit Audit Corp.  
8512 Allen Rd.  
Peoria, IL 61615

NCO Financial Services  
POB 41417  
Dept. 99  
Philadelphia, PA 19101

NCO Financial Systems, Inc.  
PO Box 105031  
Atlanta, GA 30348

Northern Illinois Imaging  
PO Box 1733  
Rockford, IL 61110-0233

Northland Group  
POB 390846  
Minneapolis, MN 55439

Palisades Collection  
210 Sylvan Ave  
Englewood, NJ 07632

Palisades Collection  
POB 1274  
Englewood Cliffs, NJ 07632

Park Dansan  
PO Box 248  
Gastonia, NC 28053-0248

Pathology Consultants  
PO Box 583  
Michigan City, IN 46361-0583

Porter Hospital  
814 LaPorte Ave.  
Valparaiso, IN 46383-5860

Pramod K. Anand, M.D.  
Dinesh K. Jain, M.D.  
71 W. 156th Street  
Harvey, IL 60426

Primeco Personal Communications  
PO Box 672110  
Dallas, TX 75267-2110

Progressive Insurance Company  
c/o NCO Financial  
PO Box 41466  
Philadelphia, PA 19101

Providian  
PO Box 660786  
Dallas, TX 75266-0786

Radiologic Associates NW IN INC  
825 E. Lincolnway  
Valparaiso, IN 46383-5803

Radiology Consultants of Rockford  
PO Box 4542  
Rockford, IL 61110

Rockford Mercantile Agency  
2502 South Alpine Road  
PO Box 5847  
Rockford, IL 61108

Sentry Credit  
POB 12070  
Everett, WA 98206

Smits Funeral Homes, LTD  
c/o Kenneth J. Donkel  
9697 W. 191st St., Suite 200  
Mokena, IL 60448

St. James Hospital  
c/o Mutual Hospital Services, Inc.  
2525 N. Shadeland Ave.,  
Indianapolis, IN 46219

St. James Hospital & Health Center  
PO Box 580  
Chicago Heights, IL 60412

St. Margaret Mercy Hospital  
c/o Mutual Hospital Services, Inc.  
2525 N. Shadeland Ave.,  
Indianapolis, IN 46219

Surburban Heights Medical Center  
PO Box 515  
Chicago Heights, IL 60412-0515

SwedishAmerican Hospital  
PO Box 4448  
Rockford, IL 61110-0948

Teresa Burton  
C/O Attorney Mary Vincent  
POB 685  
Warren, IL 61087

The Monroe Clinic  
2009 5th Street  
Monroe, WI 53566-1575

Tri-State Adjustments  
440 Challenge St  
Freeport, IL 61032

United Collection Bureau  
POB 140190  
Toledo, OH 43614

Unity Physician Group  
c/o Central Indiana Credit & Coll.  
PO Box 4779  
Bloomington, IN 47402

Verizon North  
PO Box 920041  
Dallas, TX 75392-0041

Wolpoff & Abramson, L.L.P.  
Two Irvington Centre  
702 King Farm Blvd  
Rockville, MD 20850